

CHRISTIAN AUSTIN-HOLLANDS ESQ.

FACSIMILE TRANSMITTAL SHEET

TO:	FROM:
Filing Receipt Corrections	Christian Austin-Hollands
COMPANY:	DATE:
Commissioner for Patents	JULY 7, 2004
PO Box 1450	
Alexandria, VA 22313-1450	
FAX NUMBER:	TOTAL NO. OF PAGES INCLUDING COVER:
703.746.9195	11
PHONE NUMBER:	SENDER'S REFERENCE NUMBER:
	FX/A3010- 317006
RE:	YOUR REFERENCE NUMBER:
	10/684,508

☐ URGENT ☐ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY ☐ PLEASE RECYCLE

NOTES/COMMENTS:

Please find attached:

- (1) Transmittal Form
- (1) Filing Receipt Correction Request
- (1) marked up copy of the Filing Receipt;
- (1) copy of the originally filed Declaration and OIPE stamped receipt;
- (1) copy of Assignment and OIPE stamped receipt.

225 BUSH ST, SUITE 1600
SAN FRANCISCO, CA 94104
415.762.9543

PTO/SB/21 (08-03)

Approved for use through 08/30/2003. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/684,508	
	Filing Date	October 15, 2003	
	First Named Inventor	Livia POLANYI et al.	
	Art Unit	2644	
	Examiner Name	Not Yet Assigned	
Total Number of Pages in This Submission	10	Attorney Docket Number	FX/A3010-317006

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Please see remarks
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Enclosures include: (1) Filing Receipt Correction Request (1) marked up copy of the Filing Receipt; (1) copy of the originally filed Declaration and OIPE stamped receipt; (1) copy of Assignment and OIPE stamped receipt.	
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Christian Austin-Hollands (Reg. No. 46,527) Customer No. 31011	
Signature		
Date	July 7, 2004	

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Typed or printed name	Christian Austin-Hollands (Reg. No. 46,527)	
Signature		Date July 7, 2004

This collection of information is required by 37 CFR 1.6. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/684,508
Applicants : Livia POLANYI et al.
Filed : October 15, 2003
TC/A.U. : 2644
Examiner : UNKNOWN
Docket No. : FX/A3010-317006
Customer No.: 31011

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

FILING RECEIPT CORRECTION

Sir:

Applicants respectfully request correction of the attached filing receipt and the issue of a new filing receipt for the above identified application. In particular, Applicants request that the name "Gianni Lorenzo THIONE" shown on the attached marked up copy of the Filing Receipt mailed April 1, 2004 be corrected to "Giovanni Lorenzo THIONE". In support of this request, please find attached one marked up copy of the Filing Receipt showing the changes; one copy of the originally filed Declaration and Power of Attorney and OIPE stamped receipt; and one copy of the Assignment and OIPE stamped receipt.

Respectfully submitted,

Christian Austin-Hollands
Reg. No. 46,527

Date: JULY 7, 2004

CHRISTIAN AUSTIN-HOLLANDS
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DEPOSIT ACCOUNT USE AUTHORIZATION Please grant any extension necessary for entry; Charge any fee due to Deposit Account No. 50-3023
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APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/684,508	10/15/2003	2644	2230	FX/A3010 / AHS 317006	20	39	16

CONFIRMATION NO. 6736

31011
CHRISTIAN AUSTIN-HOLLANDS ESQ.
P.O. BOX 170325
SAN FRANCISCO, CA 94117

FILING RECEIPT



Date Mailed: 04/01/2004

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Giovanni
Lorenzo
Thione

Livia Polanyi, Palo Alto, CA;
Martin H. Van Den Berg, Palo Alto, CA;
~~Gianni Lorenzo Thione~~, San Francisco, CA;
Richard S. Crouch, Cupertino, CA;
Christopher D. Culy, Mountain View, CA;
David D. Ahn, Palo Alto, CA;

Domestic Priority data as claimed by applicant

Foreign Applications

If Required, Foreign Filing License Granted: 02/18/2004

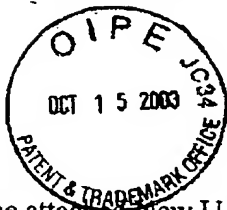
Projected Publication Date: 04/21/2005

Non-Publication Request: No

Early Publication Request: No

Title

Systems and methods for hybrid text summarization



The attached New U.S. Patent Application for:

Attorney Docket No: FX/A3010 / AHS 317006

INVENTOR: Livia POLANYI et al.

TITLE: SYSTEMS AND METHODS FOR HYBRID TEXT

SUMMARIZATION

including:

- 46 pages of specification including: an abstract, and 39 claims;
- 20 drawings sheets containing figures 1-20;
- 1 signed facsimile declaration and power of attorney;
- 3 copies of an application fee determination sheet and attached request to charge fees to Xerox Deposit Account 24-0037; and
- 1 information disclosure statement comprising a U.S. PTO SB/08A, and 1 non-patent reference

was filed in the U.S. Patent and Trademark Office on October 15, 2003.

Christian Austin-Hollands (Registration Number 46,527)

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U.S. Patent Office Customer Number 31011

Form PTO-1595 (Rev. 10/02) OMB No. 0651-0027 (exp. 6/30/2005) Tab settings ⇨ ⇨ ⇨		RECORDATION FORM COVER SHEET PATENTS ONLY		U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office	
To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.					
1. Name of conveying party(ies): Livia POLANYI Martin H. VAN DEN BERG Giovanni L. THIONE Richard S. CROUCH Christopher D. CULY David D. AHN Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		2. Name and address of receiving party(ies) Name: <u>Fuji Xerox</u> Internal Address: _____ Street Address: <u>17-22 Akasaka 2-chome</u> <u>Minato-ku Tokyo, Japan</u> City: _____ State: _____ Zip: _____ Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
3. Nature of conveyance: <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other _____ Execution Date: <u>3/11/04; 3/16/04; 4/3/04</u>					
4. Application number(s) or patent number(s): If this document is being filed together with a new application, the execution date of the application is: <u>10/15/03</u> A. Patent Application No.(s) <u>10/684,508</u> <u>Attorney Docket No. FX/A3010-317006</u> Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
5. Name and address of party to whom correspondence concerning document should be mailed: Name: <u>Christian Austin-Hollands Esq.</u> Internal Address: _____ Street Address: <u>PO Box 170325</u> City: <u>San Francisco</u> State: <u>CA</u> Zip: <u>94117</u>		6. Total number of applications and patents involved: <u>1</u> 7. Total fee (37 CFR 3.41).....\$ <u>40.00</u> <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account 8. Deposit account number: <u>50-3023</u>			
DO NOT USE THIS SPACE					
9. Signature. <u>Christian Austin-Hollands (Reg No. 46,527)</u> Name of Person Signing <u>4/22/2004</u> Date Total number of pages including cover sheet, attachments, and documents: <u>3</u>					

Mail documents to be recorded with required cover sheet information to:
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